

07-13-01

PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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JC812 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

JC971 U 07/12/01 09/04/08 PTO

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 35]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 24]
5. Oath or Declaration [Total Pages]

 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)

- i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

Attorney Docket No.	9925/34713
First Inventor	Patrick Toomey
Title	System & Methods for Detecting Fault in Structure
Express Mail Label No.	EL617584395US

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ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS		
9.	<input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10.	<input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
11.	<input type="checkbox"/> English Translation Document (if applicable)	
12.	<input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13.	<input type="checkbox"/> Preliminary Amendment	
14.	<input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15.	<input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16.	<input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No.: _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	24728 (Insert Customer No. or Attach bar code label here)	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone		Fax
Name (Print/Type)	Jon M. Jurgovan	Registration No. (Attorney/Agent)	34,633
Signature	<i>Jon M. Jurgovan</i>		Date 7/12/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



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PATENT - TRADEMARK OFFICE

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,012)

Complete if Known

Application Number	
Filing Date	7/12/01
First Named Inventor	Patrick Toomey
Examiner Name	
Group Art Unit	
Attorney Docket No.	9925/34713

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.272. Payment Enclosed: Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)		
101	710	201	355	Utility filing fee	355
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				(\$)	355

2. EXTRA CLAIM FEES

Total Claims	Extra Claims		Fee from below	Fee Paid
	93	-20** = 73		
Independent Claims	93	-20** = 73	9	657
Multiple Dependent	0	-3** = 0	0	0

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid		
Fee Code (\$)	Fee Code (\$)				
103	18	203 9	Claims in excess of 20		
102	80	202 40	Independent claims in excess of 3		
104	270	204 135	Multiple dependent claim, if not paid		
109	80	209 40	** Reissue independent claims over original patent		
110	18	210 9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)				(\$)	657
Other fee (specify)					
Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)				(\$)	0

**or number previously paid, if greater; For Reissues, see above

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Signature	Registration No. (Attorney/Agent)	Telephone	Date
Jon M. Jurgovan		34,633	(404) 504-7652	
Signature				7/12/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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